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Sheet 1 of 1

FORM PTO-1449 (Modified)		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE				ATTY. DOCKET NO. K-1709		SERIAL NO. 10/050,395						
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use several sheets if necessary) (37 CFR 1.98(b))						APPLICANT Robert A. Erickson et al.								
						FILING DATE January 16, 2002		GROUP 3722						
U.S. PATENT DOCUMENTS														
EXAMINER INITIAL		PATENT NUMBER							ISSUE DATE	PATENTEE	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE	
DH	<i>[Signature]</i>	5	0	4	0	9	3	2	08/1991	Oshnock	409	234		
DH	<i>[Signature]</i>	5	8	5	3	2	7	1	12/1998	Schanz	408	146		
DH	<i>[Signature]</i>	4	9	5	5	7	6	7	09/1990	Kaiser et al.	408	146		
DH	<i>[Signature]</i>	4	5	7	1	1	3	2	02/1986	Bunge	409	234		
DH	<i>[Signature]</i>	4	0	6	3	8	4	3	12/1977	Barkley et al.	408	146		
DH	<i>[Signature]</i>	3	7	8	2	8	4	9	01/1974	Mizoguchi	408	197		
DH	<i>[Signature]</i>	9	4	5	3	6	8		01/1910	Bocorselski				
FOREIGN PATENT OR PUBLISHED FOREIGN PATENT APPLICATION														
		DOCUMENT NUMBER							PUBLICATION DATE	COUNTRY OR PATENT OFFICE	CLASS	SUBCLASS	TRANSLATION	
													YES	NO
OTHER DOCUMENTS (Including Author, Title, Date, Relevant Pages, Place of Publication)														
EXAMINER		<i>[Signature]</i>								DATE CONSIDERED		<i>12-27-03</i>		
EXAMINER: Initial citation considered. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.														

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PTO/SB/08B (04-03)

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Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete If Known

Application Number	10/050,395
Filing Date	January 16, 2002
First Named Inventor	Robert A. Erickson
Art Unit	3722
Examiner Name	
Attorney Docket Number	K-1709

Sheet	2	of	2
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NON PATENT LITERATURE DOCUMENTS

[illegible]

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**Examiner
Signature**

Howell

Date
Considered

12-27-03

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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